

MILITARY APPLICATION FORM
for
Postdoctoral Fellowship Program

PRIVACY ACT STATEMENT: Authority to obtain this information from you is Title 10, U.S. Code, Section 8012 Appointment: powers and duties delegated by the Secretary of the Air Force and Executive Order 9397 pertaining to Social Security Account Number. This information will be used by the Graduate Health Education Selection Board to make final selection of individuals for participation in the Air Force Postdoctoral Fellowship Program in Clinical Health Psychology. Disclosure is voluntary. However, without it, selection for this particular program can not be made.

Date:_____

1. Name:_____ Rank:_____

Sex:_____ Age:_____ Marital Status:_____

SSAN:_____ Years Active Duty:_____

Duty Address:

Home Address:_____

Duty Phone: _____ Home Phone: _____

E-Mail Address: _____

2. Previous Academic Training:

<u>University</u>	<u>Department</u>	<u>Dates (mo/yr)</u>	<u>Major</u>	<u>Degree</u>
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a. _____

b. _____

c. _____

3. Previous CME Training in Behavioral Health Psychology Skills.

4. Briefly describe your dissertation topic.

5. Please list your current and prior Military assignments and type of duties (use back of this page if necessary):

Assignment

Duties

a. _____

b. _____

c. _____

d. _____

6. List any previous military education courses you have completed:

Course

Date Completed

a. _____

b. _____

c. _____

7. List, if any, state licensure, honors granted or offices held.

8. List any professional society memberships.

9. Letters of recommendation will be sent from:

<u>Name</u>	<u>Title</u>	<u>Address</u>
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a. _____

b. _____

c. _____

10. Describe any previous research experience.

11. Describe your other professional interests.

NOTE: For any of the following questions, attach additional pages if necessary.

12. Describe what you feel has been your most valuable clinical experience to date.

13. Describe what you hope to obtain from this Fellowship Program (goals, skills, clinical experience, research issues, patient populations, etc.).

13a. Describe what you see yourself doing after completing this fellowship program.

13b. Describe what you see yourself doing 10 years from completing this fellowship program.

14. Include any additional information you would like us to consider.